

**Los Angeles County Department of Mental Health
Transitional Age Youth System of Care (TAY-SOC)
Quality Improvement Committee Meeting**

Meeting Minutes: November 21, 2013
Location: West Central Mental Health
3751 Stocker St, Los Angeles 90008

Chair: Staci Atkins, Chairperson
Minutes: Staci Atkins

Start Time: 9am
End Time: 11am

Attendees:

Atkins, Staci - DMH/West Central Family MHC
Chae, Christine-Tessie Cleveland
Crosby, Mary-DMH/QI
Chavez, Joseph A.-St. Francis
Davis, Margaret-Personal Involvement Center
Dinsay, Leah-DMH/Compton MHC
Dobbs, Dr. Lori-DMH/QA
Downey, Keisha-Eggleston Youth Centers, Inc.
Echeverria, Liz - SCHARP/Barbour & Floyd
Elder, Julie-SCHARP/Barbour & Floyd
Espinass, Lani-Crittenton
Fisher, Cathy - 1736 Family Crisis Center
Garnica, Andrea-Weber Community Center
Gertmenian, Dr. Socorro-LA Child Guidance
Gonzales, Jannelle-Hollygrove EMQ
Gutierrez, Elva-The Guidance Center
Hernandez, Martin-DMH/Patients' Rights
Kausar, Ahmad-DMH/Specialized Foster Care
Kim, Kathleen -Counseling4Kids
Leon, Lori-CII
Lewis, Yolanda-Pacific Clinics

Moore, Vynette-Shields for Families
Nguyen, Thang-DMH/Program Review
Oh, Agnes-Drew Child Development Center
Salazar, Nicole-Exodus Recovery
Spears, Kimberly-DMH/SA 6 Administration
Vigil, Andy-Drew Child Development Center
Wilkerson, Kameelah-Hathaway-Sycamores
Woods, Rosary-Kedren Mental Health

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Agenda Item/Presenter	Discussion	Decisions/Scheduled Tasks
Welcome & Introductions		
Agenda Item/Presenter	Discussion	Decisions/Scheduled Tasks
Review of Meeting Minutes	<ul style="list-style-type: none"> Standard 	<ul style="list-style-type: none"> Minutes were approved without correction
Quality Improvement -Staci Atkins		
Clinical Quality Improvement-OMD Report	<ul style="list-style-type: none"> Discussed Summary of Findings and/or Disallowances. 	<ul style="list-style-type: none"> Handout provided
Referrals from ACCESS Center	<ul style="list-style-type: none"> EQRO is concerned about clients referred through ACCESS not receiving services. QIC voiced confusion regarding the action they are supposed to take following ACCESS referral due to the fact that client is referred to multiple agencies. Also discussed the fact that referrals are at times inappropriate for the type of services agencies provide. Providers completed ACCESS Survey and returned to QIC Chair. Providers encouraged to contact Dr. Michael Tredinnick, ACCESS supervisor, with any questions or concerns. 	
EPSDT Report & MHSIP Report 2012 Update	<ul style="list-style-type: none"> QIC was informed that some providers feel like the threshold amount for "high utilizers" is too low. Will be discussed at next Departmental QI Meeting. 	
Policy Update-Office of Compliance	<ul style="list-style-type: none"> QIC was provided handout that details recent policies that have been updated. 	<ul style="list-style-type: none"> See handout

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Agenda Item/Presenter	Discussion	Decisions/Scheduled Tasks
<p>Quality Assurance-Staci Atkins</p> <p>IBHIS Update</p> <p>Update on Statewide Disallowances</p>	<ul style="list-style-type: none"> Currently trying to prevent practitioners from being in the system multiple times. Episodes will never close, unless client is deceased. Conversion will be only for clients active for the past 10 years. Report of duplicate clients forthcoming. Information regarding documentation and simplifying the number of assessment forms will be discussed at next month's meeting. Power Point provided regarding <i>Concept of Episodes in IBHIS</i>. 	<ul style="list-style-type: none"> See handout
<p>QA Technical Assistance</p> <ul style="list-style-type: none"> QA Bulletin 13-05: Authorized Registered Nurses Draft QA Bulletin 13-06: Service Request Log and Beneficiary Acknowledgement Day Treatment Intensive & Day Rehab DHCS Chart Audit 	<ul style="list-style-type: none"> QIC reviewed QA Bulletin 13-05 for DO. LE Providers informed that they must create their own policy that details how they will ensure their RNs receive necessary training. DMH is not providing training for LE RNs. DMH QA Dept. is keeping track of RNs who have completed the RN training. Log should be completed for every initial client request for services. Beneficiary Acknowledgement of Receipt should be completed for each new client and be filed in client chart. Draft form of review tool created in an effort to give more structure. Once tool has been finalized there will be a meeting to provide training. Programs mentioned in state report will need to submit an appeal and plan of correction (due 11/1/2013) for any disallowances or findings. DMH QA will submit a universal appeal on behalf of Providers. 	<ul style="list-style-type: none"> See handout See handout See handout See handout

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Agenda Item/Presenter	Discussion	Decisions/Scheduled Tasks
<p>Health Information Management</p> <ul style="list-style-type: none"> Enterprise Documentation Scanning HIPAA Privacy Breaches <p>State DHCS Updates</p> <p>Program Review/Certification</p> <p>Open Agenda</p>	<ul style="list-style-type: none"> Document scanning project to roll out in SA 2. Twenty-one document types per chart to be scanned. There will be select super trainers who will go around to various areas conducting in-house trainings. Discussed recent incidents of HIPAA violations involving members of the DMH workforce. State DHCS lead audits for inpatient and outpatient services (not specific to LA County) Some day treatment programs were not open for number of hours required, not completing progress notes, subcontracting out. Martin Hernandez (PRO) presented on State required handouts. Deferred None <p>Next Meeting is Thursday, January 23rd</p>	<ul style="list-style-type: none"> See handout See handouts

Staci Atkins
Staci Atkins

1/23/2014
Date